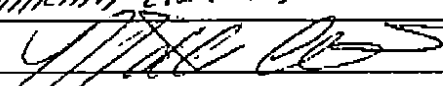


CERTIFICATE OF FACSIMILE TRANSMISSION			
I hereby certify that this correspondence is being facsimile filed under 37 C.F.R. §§ 1.6(d) and 1.8(a)(1)(b) addressed to: P.O. Box 1450 Alexandria VA 22313-1450 on this date: June 3, 2004			
Typed or Printed Name	MARTHA CISNEROS	Facsimile No.: 703-872-9306	
Signature		Date	6/3/04

INTERVIEW SUMMARY Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	Attorney Docket	LIFE-016
	First Named Inventor	Tahir Sadik Khan
	Application Number	09/737,179
	Confirmation Number	8410
	Filing Date	December 13, 2000
	Group Art Unit	1743
	Examiner Name	Alexander, Lyle
	Title	Methods of Manufacturing Reagent Test Strips

Dear Sir:

This Interview Summary sets forth the substance of a telephonic interview held between Examiner Lyle Alexander and the undersigned on May 10, 2004 during which non-substantive amendments to claims 9, 10, 16 and 29 were discussed to correct the dependency of claims 9, 10 and 16 and to correct a typographical error at claim 29.

The Interview Summary prepared by Examiner Alexander and mailed May 14, 2004 includes an error at page 2, line 9 which the Applicant believes to be a typographical error. "In the last line of claim 26..." should be "In the last line of claim 29..." During a telephone call held between Examiner Lyle Alexander and the undersigned on June 2, 2004, Examiner Alexander acknowledged that the amendment to replace "and" with --- is with respect to claim 29 and not claim 26. The Examiner stated that a Supplemental Notice of Allowability indicating the amendment to claim 29 and not to claim 26 would be mailed to the Applicants.

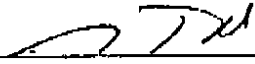
LFS-111

Atty Dkt. No.: LIFE-016
USSN: 09/737,179

The Commissioner is hereby authorized to charge any underpayment of fees associated with this communication, including any necessary fees for extensions of time, or credit any overpayment to Deposit Account No. 50-0815, account no. LIFE-016.

Respectfully submitted,
BOZICEVIC, FIELD & FRANCIS LLP

Date: 6/3/04

By: 
Susan Tall
Registration No. 52,272

BOZICEVIC, FIELD & FRANCIS LLP
200 Middlefield Road, Suite 200
Menlo Park, CA 94025
Telephone: (650) 327-3400
Facsimile: (650) 327-3231

F:\DOCUMENTALIFE\016\interview summary.doc

RECEIVED
CENTRAL FAX CENTER

JUN 03 2004

OFFICIAL

Please type a plus sign (+) inside this box ->



PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application Number	09/737,179			
		Filing Date	December 13, 2000			
		First Named Inventor	KHAN, TAHIR, SADIK			
		Group Art Unit	1743			
		Examiner Name	Lyle Alexander			
Total Number of Pages In This Submission	3	Attorney Docket Number	LIFE-016			
ENCLOSURES (check all that apply)						
<table border="0"> <tr> <td style="vertical-align: top;"> <input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Documents <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 </td> <td style="vertical-align: top;"> <input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) </td> <td style="vertical-align: top;"> <input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input checked="" type="checkbox"/> Interview Summary <input type="checkbox"/> Other Enclosure(s) (please identify below): </td> </tr> </table>				<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Documents <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input checked="" type="checkbox"/> Interview Summary <input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Documents <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input checked="" type="checkbox"/> Interview Summary <input type="checkbox"/> Other Enclosure(s) (please identify below):				
Remarks						
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT						
Firm or Individual Name	SUSAN C. TALL, Reg. No. 52,272					
Signature						
Date	June 3, 2004					

CERTIFICATE OF FACSIMILE TRANSMISSION			
I hereby certify that this correspondence is being facsimile filed under 37 C.F.R. §§ 1.6(d) and 1.8(a)(1)(b) addressed to: (703) 872-9306 on this date: June 3, 2004.			
Typed or printed name	Martina Ciaroni		Date
Signature			June 3, 2004

Burdon Hour Statement: This form is estimated to take .2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, P.O. Box 1450 Alexandria VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: P.O. Box 1450 Alexandria VA 22313-1450. LFS-111